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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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APR 15 2002

Technology Center 2600

First Named
Inventor : Zine-Eddine Boutaghou et al.

Appln. No.: 09/885,513

Filed : June 20, 2001

For : SLIDER WITH PREDICTED TIPPED
POSITION

Docket No.: S01.12-0672

Group Art Unit: 2652

Examiner:

SECOND REQUEST FOR CORRECTED FILING RECEIPT

Commissioner for Patents
Office of Initial Patent Examination
Customer Service Center
Washington, D.C. 20231

I HEREBY CERTIFY THAT THIS PAPER IS BEING
SENT BY U.S. MAIL, FIRST CLASS, TO THE
ASSISTANT COMMISSIONER FOR PATENTS,
WASHINGTON, D.C. 20231, THIS

25 DAY OF March, 2002

Deirdre Kvale
PATENT ATTORNEY

Sir:

1. Enclosed is a copy of the Corrected Filing Receipt received from the PTO in the above-identified application for which issuance of a second corrected Filing Receipt is requested. A copy of the Preliminary Amendment filed January 16, 2002 is enclosed for clarification.
2. There is an error with respect to the Domestic Priority data as claimed by applicant, which contains incorrect information. Please delete reference to U.S. Provisional Serial Number 60/213,087.

The Director is authorized to charge any fee deficiency required by this paper or credit any overpayment to Deposit Account No. 23-1123.

Respectfully submitted,

WESTMAN, CHAMPLIN & KELLY, P.A.

By:

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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/885,513	06/20/2001	2652	840	S01.12-0672	8	20	3

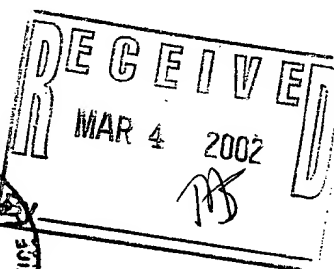
CONFIRMATION NO. 5622

CORRECTED FILING RECEIPT



OC00000007547648

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Date Mailed: 02/27/2002

Receipt is acknowledged of this non-provisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Zine-Eddine Boutaghou, Vadnais Heights, MN;
Jing Gui, Fremont, CA;

Domestic Priority data as claimed by applicant

THIS APPLN CLAIMS BENEFIT OF 60/213,087 06/20/2000
AND CLAIMS BENEFIT OF 60/212,942 06/20/2000

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Foreign Applications

If Required, Foreign Filing License Granted 08/15/2001

Projected Publication Date: Not Applicable

Non-Publication Request: No

Early Publication Request: No

Title

Slider with predicted tipped position

Preliminary Class



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Bib Data Sheet

CONFIRMATION NO. 5622

SERIAL NUMBER 09/885,513	FILING DATE 06/20/2001 RULE	CLASS 360	GROUP ART UNIT 2652	ATTORNEY DOCKET NO. S01.12-0672	
APPLICANTS Zine-Eddine Boutaghou, Vadnais Heights, MN; Jing Gui, Fremont, CA;					
** CONTINUING DATA ***** THIS APPLN CLAIMS BENEFIT OF 60/212,942 06/20/2000					
** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/15/2001					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY MN	SHEETS DRAWING 8	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
ADDRESS Deirdre Megley Kvale Westman, Champlin & Kelly International Centre, Suite 1600 900 Second Avenue South Minneapolis ,MN 55402-3319					
TITLE Slider with predicted tipped position					
FILING FEE RECEIVED 840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		